

ISSUE SLIP STAPLE AREA (for additional cross references)

POSITION	INITIALS	ID NO.	DATE
FEE DETERMINATION	S-S		03-22-01
O.I.P.E. CLASSIFIER		49	4/20/01
FORMALITY REVIEW	C.V.	1 C 603	05/02/01
RESPONSE FORMALITY REVIEW	A.M	J2 580	07-23-01

BEST AVAILABLE COPY

INDEX OF CLAIMS

✓ Rejected
 = Allowed
 - (Through numeral).... Canceled
 ÷ Restricted

N Non-elected
 I Interference
 A Appeal
 O Objected

Claim	Date
Final	
Original	
1	6-7-01
2	7-26-01
3	7-27-01
4	N
5	7/24/01
6	7/25/01
7	
8	✓ ✓ ✓
9	✓
10	✓
11	✓
12	N
13	
14	✓
15	✓ ✓ ✓ ✓
16	✓ ✓ N N
17	✓ ✓ ✓ ✓
18	✓ N N N
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21	✓ ✓ ✓
22	N
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24	✓ ✓
25	✓ ✓ ✓
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Claim	Date
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Claim	Date
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If more than 150 claims or 10 actions
staple additional sheet here

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10-20-01
7/23/01
8/5/01
8/20/01
8/23/01